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Substitute for form 1449/PTO		Complete if Known			
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STATEMENT BY APPLICANT			APPLICANT	First Named Inventor	Gadze C. NAUTA
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	(Use as many sh	eets as	s necessary)	Examiner Name	S. K. Singh
Sheet	1	of	1	Attorney Docket Number	0142-0446P

U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	

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Examiner Initials*	Cite No.1	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	
		Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)				To
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